

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO. 7/425225	FILING DATE					
							APPLICANT(S)						
CLAIMS													
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			* IND. DEP.		* IND. DEP.		* IND. DEP.	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1		1		51						
2	1		1		1		52						
3		1		1		1	53						
4	1		1		1		54						
5	1		1		1		55						
6		5		5		1	56						
7		5		5		1	57						
8		5		5		1	58						
9		5		5		1	59						
10		5		5		1	60						
11		6		6		1	61						
12	1		1		1		62						
13		1		1		1	63						
14		1		1		1	64						
15		1		1		1	65						
16	1		1		1		66						
17	1		1		1		67						
18						1	68						
19						1	69						
20						1	70						
21							71						
22							72						
23							73						
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40							90						
41							91						
42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.	7		2		2		TOTAL IND.						
TOTAL DEP.		24		24		2	TOTAL DEP.						
TOTAL CLAIMS						16	TOTAL CLAIMS						

PTO-1360 (3-78)

\*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO 476)						SERIAL NO. 01/02/03/04/05		FILING DATE				
						CLAIMS						
	AS FILED		AFTER IN AMENDMENT		AFTER IN AMENDMENT		NO.	OFF.	NO.	OFF.	NO.	OFF.
	NO.	OFF.	NO.	OFF.	NO.	OFF.						
1			1				61					
2			1				62					
3				1			63					
4			1				64					
5			1				65					
6				1			66					
7				1			67					
8				1			68					
9				1			69					
10				1			70					
11				1			71					
12				1			72					
13				1			73					
14				1			74					
15				1			75					
16				1			76					
17				1			77					
18				1			78					
19				1			79					
20				1			80					
21				1			81					
22				1			82					
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25				1			85					
26				1			86					
27				1			87					
28				1			88					
29				1			89					
30				1			90					
31				1			91					
32				1			92					
33				1			93					
34				1			94					
35				1			95					
36				1			96					
37				1			97					
38				1			98					
39				1			99					
40				1			100					
41				1			TOTAL NO.					
42				1			TOTAL OFF.					
43				1			TOTAL					
44				1								
45				1								
46				1								
47				1								
48				1								
49				1								
50				1								
TOTAL NO.			2									
TOTAL OFF.			9									
TOTAL			110									

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